

While these guidelines have reduced the frequency of on-the-job exposures (*occupational exposure*) to HIV, needle-sticks and other direct contact with blood and body fluids sometimes occur. The New York State Department of Health recommends that health care workers who experience significant risk of exposure to HIV take medicines to reduce the risk of HIV infection. This is called *postexposure prophylaxis* (PEP) (see question 58).

32. Can I get HIV from contact with my doctor, dentist, or other health care professional?

It is extremely unlikely that you can get HIV or other blood-borne diseases from a doctor, dentist, or other health care professional. To protect themselves and their patients, health care workers are required to use Universal Precautions to reduce the risk of exposure to blood or body fluids. Universal Precautions include always wearing latex gloves when taking blood samples or giving shots and washing hands before and after all medical procedures. Dental health care providers should use latex gloves whenever they place their fingers in or around a patient's mouth. *All* medical personnel should use Universal Precautions with *all* patients. Patients can ask their health care providers about how Universal Precautions are followed where they receive their care.

Testing

33. Is there a test for HIV infection?

Yes. There are a number of tests that detect either antibodies to HIV or HIV itself.

Your body produces antibodies to fight germs. People who are infected with HIV have HIV antibodies in their body fluids. There are two kinds of HIV antibody tests available in New York State: a blood test and an oral test.

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HIV antibody tests do not measure the amount of virus in the bloodstream. The tests also cannot tell if a person has AIDS, which is a late stage of HIV disease (see question 1).

Other tests measure HIV directly rather than measuring antibodies to the virus. These tests are usually used to measure the amount of HIV in the bloodstream of someone who has already had a positive HIV antibody test. In some special situations (for example, to test newborn babies of HIV-infected women), tests that measure HIV directly are used to detect HIV infection. However, the HIV antibody test is by far the most common test for HIV infection.

34. Who needs to get tested for HIV?

Everyone should know his or her HIV status. It is important for women who are pregnant or considering pregnancy to be tested. In addition, individuals who are at greater risk for HIV and who should be tested are those who:

- have had unprotected anal, oral, or vaginal sex;
- have shared needles, syringes, or works used to inject drugs, steroids, hormones, vitamins, insulin, or other substances;
- have ever had a sexually transmitted disease (chlamydia, syphilis, gonorrhea, herpes, genital warts);
- have had many sex partners;
- received blood or blood products **before 1985** (the year in which the U.S. began screening donated blood for HIV);
- work in health care or other occupations where they may be exposed to HIV on the job ; or
- are victims of sexual assault.

35. How do I get tested for HIV?

There are several different HIV testing options. Anonymous HIV antibody testing is provided free by the New York State Department of Health, by the New York City Department of Health and Mental Hygiene, and by some county health departments. Confidential HIV antibody testing is offered by many local health

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department clinics, community health centers, hospitals, family planning clinics, and private doctors (see question 36).

HIV testing is voluntary. When you go for an HIV test at a clinic or other testing site, or if you are offered a test by a doctor's office, you will receive pre-test counseling. A counselor, doctor, or other health care provider will discuss your testing options and review your HIV risk. You will need to give written consent for the HIV test (see question 37).

For a *standard HIV test*, a blood or oral fluid sample is taken and sent to a laboratory; you will need to come back about a week after the test to get your test result. At some clinics and doctors' offices, you can get a *rapid HIV test*, which can give you the results that day. The test takes about 20 minutes to get results. If your rapid HIV test is positive, it will need to be confirmed by a second test, which is sent to a laboratory. This is called a *confirmatory test*. The results of this test are not ready right away. When you get your test result, you will receive post-test counseling about what the result means. If you test positive for HIV, you will receive information on how to reduce the risk of passing the virus to others, referrals for medical care, and other social services.

A home HIV test kit is sold over-the-counter at pharmacies and other stores. With the home test kit, you take a finger-stick blood sample and send it to a laboratory. Later, you call to get the test result over the phone, using an anonymous code

number. You can receive a referral for medical follow up and re-testing if you test positive for HIV (see Resources section, page 45).

To find out more about getting tested, call your doctor, local hotline number, or the State Department of Health.

36. What is the difference between anonymous and confidential testing?

If you have a **confidential** HIV test, you will give your name and other identifying information (age, gender) to the test counselor, doctor, or other health care provider, and the test result will be put in your medical record. The names of people who test positive for HIV are given to the New York State Department of Health to help the department better respond to the HIV/AIDS epidemic in New York State (see questions 88, 89). Information about your HIV status is given *only* to the New York State Department of Health and is kept confidential. The confidentiality of all HIV-related information is protected by New York State Public Health Law.

If you have an **anonymous** HIV test, you do not have to give your name or any other identifying information. Instead, you are given a code number, which you use to get your test results when you return to the testing site. An anonymous test result is not recorded in your medical record and is not sent to your doctor or to other health care providers. If you test positive for HIV at a site that provides anonymous testing, you can choose to give your name and change the test result to *confidential* – which allows you to get HIV-related medical care and support services (like housing assistance) without waiting for a second HIV test to confirm the result.

The New York State and New York City HIV/AIDS Hotline numbers listed in the Resources section can help you find anonymous HIV counseling and testing clinics in your area.

37. What is *capacity to consent* or *informed consent* for an HIV test?

Capacity to consent, or **informed consent**, means that the person who consents (agrees) to take a HIV test understands:

- what the HIV test is for;
- what the test result (positive or negative) means; and
- available options for care and treatment.

Before an HIV test is completed, an HIV counselor or someone else trained in HIV pre- and post-test counseling will make sure that the person being tested fully understands these three points.

38. Should I wait for symptoms to appear before getting tested?

No. If you think that you may have been exposed to HIV, you should get tested as soon as possible. You may have HIV and have no symptoms for many years. The sooner that HIV infection is detected, the sooner medical care can begin, which helps people with HIV stay healthier and live longer. In most cases, the immune system will stay healthier for a longer period of time if treatment starts before a person has symptoms.

39. How soon after exposure can HIV infection be detected?

With the HIV antibody tests used in New York State, virtually all people who are infected will test positive within one month of being infected. Most people will test positive even sooner.

The period between the time of infection and the time that a HIV antibody test can detect the infection is called the *window period*. During the window period, an infected person does have HIV and can pass HIV to other people, even if his or her HIV antibody test is negative.

So, if your HIV antibody test is negative, you can be sure that you do not have HIV *only if* you have not engaged in any HIV risk behaviors (such as having unprotected sex or sharing needles) during the past *three months* (see question 9).

A PCR (Polymerase Chain Reaction) test looks for HIV directly instead of detecting antibodies. This test can find HIV infection as soon as the person is infected. It is usually used to find HIV infection in newborns. A different type of PCR test, called a *viral load* test, is used to measure the amount of HIV in the blood of someone who is already known to be infected. Doctors may suggest an HIV PCR test if they think a person has been infected with HIV in the past few days or weeks (see question 65).

40. Is HIV testing ever mandatory?

In New York State, HIV testing is generally voluntary and cannot be done without the written, informed consent of the person being tested. However, testing is mandatory in New York State under certain circumstances:

- As of February 1997, all newborns in New York State are tested for HIV antibodies. A newborn's test result also provides information about the mother's HIV status (see question 42).
- Blood and organ donations are tested for HIV (see question 30).
- HIV testing can be required in order to participate in some federal programs, such as the Job Corps and the Armed Forces.
- Under certain conditions, inmates in federal prisons (but not in state or local correctional facilities) are tested for HIV without their consent.
- HIV testing can be required for certain types of insurance, like disability or life insurance. However, insurance companies must tell applicants they will be tested for HIV, must provide them with general information, and must have the applicant sign a consent form. In New York State, people cannot be denied health insurance because they have HIV or AIDS.

41. Why is it recommended that all pregnant women have an HIV test?

HIV can be passed from mother to child during pregnancy, labor and delivery, and breastfeeding (see question 20). However, there are medicines that can reduce this risk. The sooner a pregnant woman knows she has HIV, the sooner she can begin treatment to lower the risk of passing the virus to her baby and for her own health (see question 52). Because it is so important for pregnant women to know their HIV status, doctors are required to provide HIV counseling to all pregnant women in New York State and to recommend testing. Ideally, women should know their HIV status before considering pregnancy.

42. Why are all newborns in New York State tested for HIV?

It is very important that infants born to HIV-infected women get special medical care. Ideally, women with HIV should take HIV medicines during pregnancy and labor and delivery, and their babies should be given medicines right after birth to reduce the risk of HIV being passed to the baby. However, some women do not know that they have HIV when they are pregnant. If a woman does not take HIV medications before the baby's birth, medications can still be given to the infant right after birth to lower the chances that the baby will become infected.

Newborn screening is a safety net program for infants whose mothers were not tested for HIV during pregnancy. In New York State, all babies are tested for HIV antibodies. Since *all newborns carry their mother's antibodies*, the baby of a woman with HIV will test positive for the first 6 to 18 months, even if the baby is not actually infected. A baby with HIV antibodies will be given medicines to lower the risk of HIV infection. If a baby's HIV antibody test is positive at birth, the baby's blood will be tested a few times using a special test called PCR (which looks for HIV directly). The first test (to find out if the infant is actually infected with HIV) should be done soon after birth, preferably during the first week of life. The baby's doctor will recommend the best time(s) for the next PCR test(s). Generally, by age 4 months, a PCR test can show whether or not an infant has HIV.

Risk Reduction

43. Is there a 100% effective way to prevent sexual transmission of HIV?

The only 100% effective way to prevent sexual transmission of HIV is through abstinence – avoiding all vaginal, anal, and oral sex. Using a latex male condom or a female condom can *greatly reduce*, but not entirely eliminate, the risk of HIV transmission (see questions 44-46). However, abstinence is the only method to completely eliminate the possibility of sexual transmission of HIV.

Using a latex male condom during vaginal, anal, or oral sex greatly reduces the risk of HIV infection by reducing the chance of direct contact with another person's semen, blood or vaginal fluids.

44. Does using condoms reduce my risk of HIV infection?

Yes. Using a latex male condom during vaginal, anal, or oral sex *greatly reduces* the risk of HIV infection by reducing the chance of direct contact with another person's semen, blood, or vaginal fluids. However, condoms do not provide 100 percent protection against HIV infection.

The main reasons that condoms sometimes fail are inconsistent or incorrect use: